MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
APPLICANT(S) 10/3766566	

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2		/					52						
3							53						
4		/					54						
5							55						
6		/					56						
7		/					57						
8		/					58						
9		/					59						
10		/					60						
11							61						
12		/					62						
13							63						
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42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1	↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	12	←		←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	13						TOTAL CLAIMS						

PTO - 1360 (REV. 11/94)